

05/05/2023

DATE OF APPLICATION
05/30/2023**Marriage License**

State of Michigan

STATE FILE NO.

2023M-0031

LOCAL FILE NO.

DATE CERTIFICATE FILED

To any person legally authorized to solemnize marriage, the marriage must be solemnized in the State of Michigan on or before **06/06/2023**

COUPLE

PARENTS

ANDREW RAY KMETZ IV

FULL NAME (First, Middle, Last)

☒ MALE ☐ FEMALE**KMETZ**

SURNAME ON BIRTH CERTIFICATE, IF DIFFERENT

34**07/17/1988**

PRESENT AGE

DATE OF BIRTH

MUNSTER, IN

BIRTHPLACE - CITY AND STATE

714 E FOSTER ST.

RESIDENCE NO.

STREET

LUDINGTON, MI 49431

CITY, STATE, AND ZIPCODE

MASON**NONE**

RESIDENCE COUNTY

TIMES PREVIOUSLY MARRIED

ANDREW RAY KMETZ III

FULL NAME (First, Middle, Last)

KMETZ**IN**

SURNAME AT BIRTH

BIRTHPLACE

TERESA ANN KMETZ

FULL NAME (First, Middle, Last)

KIDWELL**KY**

SURNAME AT BIRTH

BIRTHPLACE

and

JACQUELYN NICOLE BABINSKI

FULL NAME (First, Middle, Last)

☐ MALE ☒ FEMALE**BABINSKI**

SURNAME ON BIRTH CERTIFICATE, IF DIFFERENT

31**06/07/1991**

PRESENT AGE

DATE OF BIRTH

FARMINGTON HILLS, MI

BIRTHPLACE - CITY AND STATE

714 E FOSTER ST.

RESIDENCE NO.

STREET

LUDINGTON, MI 49431

CITY, STATE, AND ZIPCODE

MASON**NONE**

RESIDENCE COUNTY

TIMES PREVIOUSLY MARRIED

BROOK ALLEN HICKMAN

FULL NAME (First, Middle, Last)

HICKMAN**MI**

SURNAME AT BIRTH

BIRTHPLACE

DENISE ELAINE CARSON

FULL NAME (First, Middle, Last)

BABINSKI**MI**

SURNAME AT BIRTH

BIRTHPLACE

Based on the affidavit filed in this office, I hereby grant this marriage license on

05/05/2023

(Month, Day, Year)

Cheryl Kelly

CHERYL KELLY, CLERK

MASON

Ashley Miller

DEPUTY CLERK

MASON

Certificate of Marriage

I hereby certify that, in accordance with the above license, the persons herein mentioned were joined in

marriage in **Marion Township**
CITY, VILLAGE, TOWNSHIPCounty of **Charlevoix** Michigan,on the **20th** day of **May** A.D. 20 **23**, in the presence of*Rev. Jonathan David Mays*

SIGNATURE OF OFFICIANT/CERTIFIER

Rev. Jonathan David Mays

NAME AND TITLE OF OFFICIANT/CERTIFIER (TYPE OR PRINT)

409 Prospect St, Charlevoix MI 49720

FULL MAILING ADDRESS OF OFFICIANT/CERTIFIER

Nicole Carson

SIGNATURE OF WITNESS

Natalie Carson

SIGNATURE OF WITNESS

Nicole Carson

NAME OF WITNESS (TYPE OR PRINT)

Natalie Carson

NAME OF WITNESS (TYPE OR PRINT)

Andrew Ray Kmetz IV

SIGNATURE OF SPOUSE

Jacquelyn Nicole Kmetz

SIGNATURE OF SPOUSE

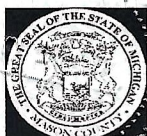
Andrew Ray Kmetz IV

PRINTED NAME OF SPOUSE

Jacquelyn Nicole Kmetz

PRINTED NAME OF SPOUSE

DCH-0482 (Rev. 11-18) By Authority of MCL 551.102



I, CHERYL KELLY, Clerk of the Circuit Court of said County of Mason do hereby certify that this document is a true copy of the record now on file in the office of the Clerk of said County and Court. IN TESTIMONY WHEREOF. I have hereunto set my hand and official seal at the city of Ludington.

Cheryl Kelly

Cheryl Kelly, Clerk

Issued this 8 day of June, 2023.
SPU5464683

VRHDS11 (12/12) Authority: MCL 333.2882

VOID WITHOUT WATERMARK OR IF ALTERED OR ERASED.